

## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DIGITAL CONTENT PUBLICATION, the specification of which:

- ☒ is attached hereto.  
☐ was filed on \_ as Application Serial No. \_ and was amended on \_\_\_\_\_.  
☐ was described and claimed in PCT International Application No. \_\_\_\_\_ filed on \_\_\_\_\_ and as amended under PCT Article 19 on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Earl D. Brown, Jr. Reg. No. 44,042  
Robert S. Gorman, Reg. No. 41,790  
John F. Rollins, Reg. No. 38,013  
Wayne P. Sobon, Reg. No. 32,438  
Sam Borodach, Reg. No. 38,388  
Richard P. Ferrara, Reg. No. 30,632  
George E. Heibel, Reg. No. 42,648  
Andrew N. Parfomak, Reg. No. 32,431  
Frederick H. Rabin, Reg. No. 24,488

David L. Feigenbaum, Reg. No. 30,378  
Stephan J. Filipek, Reg. No. 33,384  
William J. Hone, Reg. No. 26,739  
John B. Pegram, Reg. No. 25,198

Address all telephone calls to STEPHAN J. FILIPEK at telephone number (212) 765-5070.

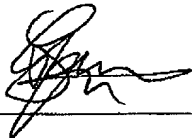
Address all correspondence to STEPHAN J. FILIPEK at:

FISH & RICHARDSON P.C.  
45 Rockefeller Plaza, Suite 2800  
New York, NY 10111

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

**Combined Declaration and Power of Attorney**

Page 2 of 2 Pages

Full Name of Inventor: L. GARREN DU  
Inventor's Signature:   
Residence Address: Brooklyn, NY  
Citizenship: USA  
Post Office Address: 1978 65th Street  
Brooklyn, NY 11204


Date: June 11, 2001

Full Name of Inventor: BRYANT CHIH-MING LEE

Inventor's Signature: \_\_\_\_\_  
Residence Address: New York, NY  
Citizenship: USA  
Post Office Address: 202 West 84th Street, #4E  
New York, NY 10024

Date: \_\_\_\_\_

Full Name of Inventor: GABRIEL MARTIN FLORES

Inventor's Signature:   
Residence Address: Boston, MA  
Citizenship: USA  
Post Office Address: 97 Ocean Street  
Boston, MA 02124

Date: 6/11/2001

Full Name of Inventor: WILLIAM HENRY MICELI

Inventor's Signature: \_\_\_\_\_  
Residence Address: Chicago, IL  
Citizenship: USA  
Post Office Address: 713 W. Wellington Avenue, #3  
Chicago, IL 60657

Date: \_\_\_\_\_

30051469.doc

09879367-064004

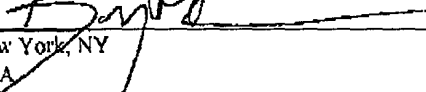
Attorney's Docket No.: 12587-015001  
Client's Ref. No.:

**Combined Declaration and Power of Attorney**Page 2 of 2 Pages  
3 4

Full Name of Inventor: L. GARREN DU

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Residence Address: Brooklyn, NY  
Citizenship: USA  
Post Office Address: 1978 65th Street  
Brooklyn, NY 11204

Full Name of Inventor: BRYANT CHIH-MING LEE

Inventor's Signature:  \_\_\_\_\_ Date: June 12, 2001  
Residence Address: New York, NY  
Citizenship: USA  
Post Office Address: 202 West 84th Street, #4E  
New York, NY 10024

Full Name of Inventor: GABRIEL MARTIN FLORES

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Residence Address: Boston, MA  
Citizenship: USA  
Post Office Address: 97 Ocean Street  
Boston, MA 02124

Full Name of Inventor: WILLIAM HENRY MICELI

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Residence Address: Chicago, IL  
Citizenship: USA  
Post Office Address: 713 W. Wellington Avenue, #3  
Chicago, IL 60657

Attorney's Docket No.: 12587-015001

Client's Ref. No.:

**Combined Declaration and Power of Attorney**Page 2 of 2 Pages  
4 4

Full Name of Inventor: L. GARREN DU

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Residence Address: Brooklyn, NY  
Citizenship: USA  
Post Office Address: 1978 65th Street  
Brooklyn, NY 11204

Full Name of Inventor: BRYANT CHIH-MING LEE

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Residence Address: New York, NY  
Citizenship: USA  
Post Office Address: 202 West 84th Street, #4E  
New York, NY 10024

Full Name of Inventor: GABRIEL MARTIN FLORES

Inventor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Residence Address: Boston, MA  
Citizenship: USA  
Post Office Address: 97 Ocean Street  
Boston, MA 02124

Full Name of Inventor: WILLIAM HENRY MICELI

Inventor's Signature: William Henry Miceli Date: 6/11/01  
Residence Address: Chicago, IL  
Citizenship: USA  
Post Office Address: 713 W. Wellington Avenue, #3  
Chicago, IL 60657

30051469.doc

T00T90 29267860